

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215520775				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: ALSTOM Grid Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: C T CORPORATION SYSTEM 4701 COX ROAD STE. 285 GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: OH</p> </div> <div style="width: 35%;"> <p>DUE DATE: 4/30/2015</p> <p>SCC ID NO: F1546615</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>500</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	500
CLASS	AUTHORIZED					
COMMON	500					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 200 GREAT POND DR.</p> <p style="margin-left: 40px;">CITY/ST/ZIP: WINDSOR, CT 06095</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MICHAEL ATKINSON TITLE: PRESIDENT ADDRESS: 10867 WILLOWS ROAD NE CITY/ST/ZIP/CO: REDMOND, WA 98052 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: MICHAEL ATKINSON TITLE: PRESIDENT ADDRESS: 10867 WILLOWS ROAD NE CITY/ST/ZIP/CO: REDMOND, WA 98052	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR	
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NAME:	DAVID H SIMPSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	200 GREAT POND DR		
CITY/ST/ZIP/CO:	WINDSOR, CT 06095		
NAME:	MICHAEL J TOLPA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	200 GREAT POND DR		
CITY/ST/ZIP/CO:	WINDSOR, CT 06095		
NAME:	SOPHIE CHALLET	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	801 PENNSYLVANIA AVE NW		
CITY/ST/ZIP/CO:	STE 855 WASHINGTON, DC 20004		
NAME:	TRACY ARCHER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	801 PENNSYLVANIA AVENUE		
CITY/ST/ZIP/CO:	STE 855 WASHINGTON, DC 20004		
NAME:	JEFFREY BARON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	130 THIRD ST., NW		
CITY/ST/ZIP/CO:	CANTON, OH 44702		
NAME:	BILL JONES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	130 THIRD ST., NW		
CITY/ST/ZIP/CO:	CANTON, OH 44702		
NAME:	INGRID LEHNERT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2 INTERNATIONAL PLAZA		
CITY/ST/ZIP/CO:	STE 855 PHILADELPHIS, PA 19114		
NAME:	KATHERINE MARKESON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	10867 WILLOWS RD.		
CITY/ST/ZIP/CO:	REDMOND,, WA 98052		
NAME:	RICHARD D AUSTIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	801 PENNSYLVANIA AVE NW		
CITY/ST/ZIP/CO:	STE 855 WASHINGTON, DC 20004		
NAME:	SOPHIE CHALLET	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	801 PENNSYLVANIA AVE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK PLAS DIRECTOR 3 AVENUE ANDRE , , FN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOSEPH SCE		JOSEPH SCE, VP, TAX	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			